

EXPIRES: April 30, 2005

ANNUAL CLIENT ASSISTANCE PROGRAM (CAP) REPORT

Fiscal Year 2004

DESIGNATED AGENCY IDENTIFICATION	
Name: Virginia Office for Protection and Advocacy	
Address: 1910 Byrd Avenue, Suite 5	
Richmond, Virginia 23230	
E-mail Address (if applicable): general.vopa@vopa.virginia.gov	
Website Address (if applicable): www.vopa.state.va.us	
Phone: (804) 225-2042	TTY: (804) 225-2042
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Fax: (804) 662-7057	
OPERATING AGENCY (IF DIFERENT FROM DESIGNATED AGENCY)	
Name: see above	
Address:	
E-mail Address (if applicable):	
Website Address (if applicable):	
Phone: ()	TTY: ()
Toll-free Phone: ()	Toll-free TTY: ()
Fax: ()	
Name of CAP Director/Coordinator: Colleen Miller	
Person to contact regarding report: Sherry Confer	
Contact Person's phone: (804) 662-7375	
PART I. AGENCY WORKLOAD DATA	
A. Information and Referral Services (I&R): (Multiple responses are not permitted.)	
1. Information regarding the Rehabilitation Act	*
2. Information regarding Title I of the ADA	*
3. Other information provided	*
4. Total I&R services provided (Lines A1+A2+A3)	1130
5. Individuals attending trainings by CAP staff (approximate)	376
* Over the past year, VOPA began the process of assessing all federal grant requirements for reporting information and referral requests. Some grants require just reporting the number of individuals requesting, some require the number of issues presented, and similar to CAP, some require specific categories. VOPA has discovered that just as the reporting requirements differ, so have the staff practices, some have reported numbers of individuals, some have reported issues and some have reported both. We have developed a reporting instrument that will reflect all the requirements and it was implemented October 1, 2004.	

B. Individuals served (An individual is counted only once during a fiscal year. Multiple counts are not permitted for Lines B1-B3.)	
1. Individuals who are still being served as of October 1 (carryover from prior year)	27
2. Additional individuals who were served during the year	27
3. Total individuals served (Lines B1+B2)	54
4. Individuals (from Line B3) who had multiple case files opened/closed this year. (In unusual situations, an individual may have more than one case file opened/closed during a fiscal year. This number is not added to the total in Line B3 above.)	0
C. Individual still being served as of September 30 (carryover to next year) (This total may not exceed Line I.B3.)	20
PART I. AGENCY WORKLOAD DATA (continued)	
D. Reasons for closing individuals' case files (Choose one primary reason for closing each case file. There may be more case files than the total number of individuals served to account for those unusual situations, referred to in Line I.B4, when an individual had multiple case files closed during the year.)	
1. All issues resolved in individual's favor	11
2. Some issues resolved in individual's favor (when there are multiple issues)	4
3. CAP determines VR agency position/decision was appropriate for the individual	3
4. Individual's case lacks legal merit; (inappropriate for CAP intervention)	4
5. Individual chose alternative representation	1
6. Individual decided not to pursue resolution	5
7. Appeals were unsuccessful	
8. CAP services not needed due to individual's death, relocation, etc.	1
9. Individual refused to cooperate with CAP	5
10. CAP unable to take case due to lack of resources	
11. Other (Please explain on separate sheet)	
E. Results achieved for individuals (Choose one primary outcome for each closed case file. As stated in Section D, there may be more case files than the total number of individuals served.)	
1. Controlling law/policy explained to individual	9
2. Application for services completed	
3. Eligibility determination expedited	
4. Individual participated in evaluation	1
5. IPE developed/implemented	2
6. Communication re-established between individual and other party	5
7. Individual assigned to new counselor/office	3
8. Alternative resources identified for individual	4
9. ADA/504/EEO/OCR complaint made	
10. Other (1 relocated, 1 lack of legal merit, 4 client decided not to pursue resolution, 4 no client response)	10

PART II. PROGRAM DATA	
A. Age (as of the beginning of the fiscal year)(Multiple responses not permitted.)	
1. 21 and under	2
2. 22 – 40	20
3. 41 – 64	32
4. 65 and over	0
5. Total (Sum of Lines A1 through A4. Total must equal Line I. B3.)	54
B. Gender (Multiple responses not permitted.)	
1. Females	22
2. Males	32
3. Total (Lines B1+B2. Total must equal Line I.B3.)	54
C. Race/ethnicity (Multiple responses are permitted.)	
1. American Indian or Alaskan Native	
2. Asian	
3. Native Hawaiian or Other Pacific Islander	
4. Black or African American	17
5. Hispanic or Latino	1
6. White	35
7. Race/ethnicity unknown	1
D. Primary disabling condition of individuals served (Multiple responses not permitted.)	
1. Blindness (both eyes)	5
2. Other visual impairments	
3. Deafness	2
4. Hard of hearing	
5. Deaf-blind	
6. Orthopedic impairments	6
7. Absence of extremities	
8. Mental illness	19
9. Substance abuse (alcohol or drugs)	
10. Mental Retardation	3
11. Specific learning disabilities (SLD)	8
12. Neurological disorders	2
13. Respiratory disorders	2
14. Heart and other circulatory conditions	1
15. Digestive disorders	
16. Genitourinary conditions	
17. Speech impairments	
18. AIDS/HIV positive	1
19. Traumatic brain injury (TBI)	4
20. All other disabilities	1
21. Disabilities not known	
22. Total (Sum of Lines D1 through D21. Total must equal Line 1.B3.)	54
E. Types of individuals served (Multiple responses permitted.)	
1. Applicants of VR Program	14
2. Clients of VR Program	40
3. Applicants or clients of IL Program	
4. Applicants or clients of other programs and projects funded under the Act	

F. Source of individual's concern (Multiple responses permitted.)	
1. VR agency only	54
2. Other Rehabilitation Act sources only	
3. Both VR agency <u>and</u> other Rehabilitation Act sources	
4. Employer	
G. Problem areas (Multiple responses permitted.)	
1. Individual requests information	
2. Communication problems between individual and counselor	5
3. Conflict about services to be provided	17
4. Related to application/eligibility process	15
5. Related to IPE development/implementation	20
6. Other Rehabilitation Act-related problems	2
7. Non-Rehabilitation Act related	3
8. Related to Title I of the ADA	
H. Types of CAP services provided (Choose one primary service CAP provided for each closed case file. As stated above, there may be more case files than actual individuals served.)	
1. Information/referral	2
2. Advisory/interpretational	17
3. Negotiation	14
4. Administrative/informal review	
5. Alternative dispute resolution	
6. Formal appeal/fair hearing	
7. Legal remedy	1
8. Transportation	
PART III. NARRATIVE (Attach separate sheet(s))	

(Electronic submission)

Colleen Miller, Executive Director

12/20/04

Date

**VIRGINIA OFFICE FOR PROTECTION AND ADVOCACY
CLIENT ASSISTANCE PROGRAM (CAP) FY2004**

PART III. NARRATIVE

a. Type of agency used to administer CAP:

- 1) External-Protection & Advocacy

b. Sources of funds

Source of funding	Total expenditures spent on individuals
Federal funds	121,876
State funds	0
All other funds	0
Total from all sources	121,876

c. Budget for current and following fiscal years

Category	Current Fiscal Year (FFY2004)	Next Fiscal Year
Wages & Salaries	56,956	167,622
Fringe Benefits (FICA, unemployment, etc.)	19,528	52,861
Materials/Supplies	893	2,315
Postage	332	719
Telephone	3,666	9,032
Rent	13,960	2,056
Travel	4,188	10,248
Copying	226	5,500
Bonding/Insurance	0	0
Equipment Rental/Purchase	3,909	4,660
Legal Services	0	3,850
Indirect Costs	10,409	35,277
Miscellaneous	7,809	31,802
Total Budget	121,876	325,942

d. Number of person-years

Type of position	Full-time equivalent	% of year position filled	Person-years
Professional			
Full-time	2	100	7
Part-time			
Vacant	1	64	
Clerical			
Full-time	0.5	67	1.3
Part-time			
Vacant	0.4	85	

e. Summary of presentations made:

The following rights related presentations about CAP and other rehabilitation programs and projects were made during the program year:

Date	Type of Event/Title/Topic	Group Addressed	Location	# of Attendees
1/21/2004	VOPA Overview	Brain Injury Support Group	Harrisonburg, VA	19
12/12/03	Open House	Valley Associates for Independent Living	Harrisonburg, VA	6
3/13/04	Health Fair	Professionals, parents, consumers	Eastville, VA	125
2/27/04	Transition & Disability Awareness Fair	Students, parents	Williamsburg, VA	130
2/19/04	Virginia Rehab Center for the Blind	Students	Virginia Beach, VA	
2/27/04	Richmond CIL Office Hours	Consumers	Richmond, VA	5
2/19/04	Chesterfield CIL Office Hours	Consumers	Chesterfield, VA	2
7/22/04	Virginia Rehab Center for the Blind	Students	Virginia Beach, VA	14
4/16/04	Virginia Beach Coalition on Disabilities	Consumers, advocates	Richmond, VA	75
8/26/04	Virginia Rehab Center for the Blind	Student	Richmond, VA	1

f. Involvement with advisory boards

- 1) VOPA has two Advisory Councils known as the Disabilities Advisory Council (DAC) and The Protection and Advocacy for Individuals with Mental Illnesses (PAIMI) Council. The Councils' primary responsibility is to advise the protection and advocacy system on policies and priorities to be carried out in protecting individuals with disabilities. This function helps VOPA to identify underserved and unserved Virginians.
- 2) VOPA participates in the Virginia Department of Education State Special Education Advisory Committee. This committee is required by the federal government as a first step in federal Continuous Improvement Monitoring Process. Discussions have included Personnel Licensure Issues, completion and submission of the Federal Annual Performance Report, IDEA Reauthorization, State Assessment Update and a State Improvement Grant.
- 3) VOPA has hired a new CAP advocate. This advocate will serve on the State Rehabilitation Council. The State Rehabilitation Council provides advice to the Department of Rehabilitative Services regarding vocational services provided pursuant to Title I and Title VI of the Federal Rehabilitation Act. Membership and duties are constructed according to federal provisions.
- 4) VOPA has experienced some staff turnover and personnel vacancies over the past year. We have not participated as consistently with some of the State wide advisory councils as we would have liked. However, we are looking forward to re-establishing a presence in FY05.

g. Outreach to unserved/underserved populations:

- 1) VOPA is comparing the demographics of Virginia with those of clients served to identify trends and pockets of underserved Virginians. This was a new activity for VOPA and there were learning steps to be taken. The VOPA client database was going to play an integral component in identifying an underserved population. However, VOPA discovered that the database had significant integrity issues. VOPA staff have spent a significant amount of time and effort to develop and implement database enhancements that will help in the identification of underserved populations.
- 2) In mid-February, VOPA began to utilize the client database to collect data on the information and referral calls coming into the Resource Advocacy Unit (provides information/referral, technical assistance, develops screenings). Previously, this information was collected on paper and hand counted. We are hoping to use this data collection to assist with the federal reporting activities as well as in the priority setting process. October 1, 2004, an electronic form was implemented for all VOPA staff to collect and report this data to help with compiling and analyzing for pockets of unserved/underserved and trends in service requests.
- 3) VOPA is providing information about the CAP program on our website.

- 4) VOPA is in the process of revising/updating most, if not all, of its publications. With this effort, we will ensure that materials addressing the CAP are developed. Part of the publication revision/updating effort includes developing a “boilerplate” Powerpoint presentation about VOPA and the services we provide.
- 5) VOPA has had significant contacts with the Governor’s Latino Advisory Commission and its staff. Consultation with the staff resulted in the VOPA Executive Director being invited to present at the Commission’s meeting. Several Commission members offered to provide contacts and linkages to the Latino community. In order to develop a more planful, strategic outreach effort, VOPA has developed a representative committee that reflects the disability and Spanish speaking communities to help in this area. This committee met in June and plans to meet quarterly. VOPA has already implemented some of their recommendations.
- 6) VOPA scheduled a training with the Department of Rehabilitation Services about their newly implemented “Order of Selection”. Understanding this process is critical to VOPA’s ability to advocate effectively for individuals trying to access DRS services.
- 7) VOPA provides “Office Hours” at some of the local Centers for Independent Living. Individuals with disabilities are informed of their CAP rights and provided with other legal advice and services when appropriate.
- 8) VOPA has represented “difficult to serve” persons who were denied employment-related services by the Department of Rehabilitative Services. We exceeded our target in this area. In one case, a woman with a traumatic brain injury had her DRS file closed because of personality conflicts with her counselor. VOPA successfully advocated to have her file re-opened and for her to receive services. VOPA has also provided assistance to persons with mental illness and traumatic brain injuries. The public has voiced its concern to us that DRS struggles to serve these persons appropriately and adequately.

h. Alternative dispute resolutions:

VOPA staff routinely engage in alternative dispute resolutions. VOPA staff assist clients with self-advocacy efforts with other entities at the lowest level of the administrative chain of command. Often, the presence of the VOPA staff encourages the “provider” to more willingly explore alternative dispute resolutions prior to the client and VOPA resorting to more formal or legal remedies. In most cases, more clear and direct communication is the optimum resolution. In all CAP cases, we engage in ADR to the maximum extent possible. VOPA always conducts significant negotiation prior to even considering litigation. We have offered formal ADR in some cases that seemed to reach a “sticking point” but never had to follow through with it as the cases generally settled. VOPA remains willing to engage in ADR whenever necessary to assist our clients.

In relation to Mediation---VOPA, as advocates/attorneys, would not conduct Mediation, but, when appropriate, would accompany and/or represent a person as an advocate within a Mediation session where there is a separate Mediator. VOPA was

not involved in any formal mediation activities this past year. Cases have been settled before that stage

i. Systemic advocacy:

- 1) A 40 year old man with legal blindness, cerebral palsy, and mild retardation had been turned down for training in computers. This was training that was through the Virginia Workforce Network in a program called Project Train It. He did not meet the criteria for the program as it was very competitive. He was sent a letter of rejection with no inclusion of the appeals procedure for him to be able to appeal the rejection. After many letters and a couple of months, he finally received a written response from their EEO Officer. However, he still didn't receive an Appeals Procedure.

After the VOPA advocate and the director of the local Association for Retarded Citizens met with the EEO officer and the Director of the local Virginia Employment Commission, they decided that indeed it would be fitting to send each person who seeks training and is turned down, a copy of the appeals procedure from the beginning rather than waiting to be asked for it. As they did not have an official appeals procedure, they asked for a copy of VOPA's appeal procedure, and used it as a model for composing their own. The EEO officer has sent it to Project Train It and other training program personnel, instructing them to include, with changes appropriate to their organization, a copy of an appeals procedure to be sent when the people are first turned down.

This complaint/appeal explanation will accompany the letter that states a person will not be eligible for Project Train It services. They shared their document with VOPA and it is nearly identical to the appeal summary that VOPA has posted on its website. Please see attachments.

- 2) CAP continued an extensive systemic project of reviewing and analyzing DRS participation in special education transition. This project began in FY01; continued through FY02; and in FY03 VOPA completed sufficient document gathering and review to support making continued review and analysis an official VOPA objective; this has been continued in FY04. This year VOPA has acquired and is reviewing contracts between school districts and DRS setting forth each entity's responsibility to provide transition planning. After extensive investigation and review of cases and complaints, VOPA has determined that DRS does not provide adequate transition services to children with disabilities. VOPA has sent a Notice of Potential Litigation to DRS demanding that it provide the services it is obligated to provide. The matter is ongoing.
- 3) VOPA has found ample evidence to suggest that DRS does not provide appropriate transition planning. For example, in several cases, DRS was not involved (or refused to be involved) in a child's transition planning. VOPA sent a Notice of Potential Litigation to DRS regarding its failures. A settlement conference was held at the end of August to attempt to reach an agreement that requires DRS to provide adequate and appropriate transition services.
- 4) VOPA's role during the General Assembly, and throughout the year, is to be available to educate policy makers about the implications of proposed legislation for people with disabilities in the Commonwealth of Virginia. In the FY04 General

Assembly session, VOPA monitored over 20 bills from the House of Representatives and Senate of Virginia. We posted a notice on our website identifying these bills and encouraged the public to use the General Assembly's website about other bills. In addition, we received communication from the public about other bills that were of importance to the disability communities in Virginia. These recommendations were explored and some were added to the VOPA list to monitor and track. Bills of note related to the CAP program included the following:

HB 817 & SB 381- Continued the Disability Commission. The Disability Commission serves as a forum where the needs and issues of people with disabilities can be addressed through the collaboration of members of the legislature, the Lieutenant Governor, the Governor's appointees, and the agencies of the Executive branch. The Commission works to accelerate effective state system change by requiring intergovernmental and interagency coordination, as well as stakeholder input on critical disability decisions

HB 354- Addressed the powers of the Assistive Technology Loan Fund Authority powers. The Authority establishes, administers, manages, including the creation of reserves, and makes expenditures from the Fund for the sole purpose of providing loans to individuals with disabilities for the acquisition of assistive technology, other equipment, or other authorized purposes. This bill authorizes the Authority to borrow money and issue bonds.

In February 2004, the Virginia Office for Protection and Advocacy moved out of a State office building that housed other state agencies and the Governor's Office. This physical move from State government property sent a powerful message to the public that VOPA is an independent State agency and no longer a part of the Executive Branch of State government. The new site offers better accessibility for potential clients, clients and guests. The new site has also had a positive impact on VOPA staff, including staff that work off-site. In April 2004, the Staunton office was closed due to personnel turnover.

Prior to October 1, 2003, VOPA was structured by funding streams. Staff caseloads were assigned based on grants. Effective October 1, 2003, the Office was re-aligned to more closely reflect the needs of the VOPA constituencies. Three units resulted; Institutions, Communities, and the Resource Advocacy Unit. After some initial growing pains, these units have become cohesive, effective, and motivated advocates and systems change agents. Services are provided both within the unit structure and across organizational lines when needed. This re-alignment reflects the complexities of the VOPA constituencies' needs; that is, not all clients fit neatly into a single grant targeted population. This structure allows the host of client needs to be addressed by a single staff person using various funding streams, instead of having to change workers to address different presenting needs. The goals of the re-structuring included:

- Improve our ability to focus on results and outcomes
- Improve quality and timeliness of investigations
- Provide best possible client services
- Be able to respond to changing demands
- Promote staff satisfaction
- Minimize middle management

Keep paperwork requirements manageable
Have manageable supervision loads

j. Interesting cases:

1. VOPA's client is 24 years old with multiple disabilities of cerebral palsy, quadriplegia, and severe scoliosis. He lives independently in an apartment and maintains socialization through participation in the local Center for Independent Living. The focus of the case work was on resolving communication problems between him and his Job Coach, a DRS Counselor. VOPA advocated for the client to have appropriate services and for better communication with his counselor. The case raises interesting policy issues surrounding appropriate communication between clients and job coaches. VOPA will continue to advocate for appropriate services and communication in the future.
2. VOPA represents a woman who has been denied medical care she needs in order to be employed. VOPA is currently in settlement negotiations with DRS but will file a Petition for a Fair Hearing if necessary. The woman is a quadriplegic who uses her mouth for almost all activities. As a result, her teeth have become worn out. She has requested that DRS fund oral surgery needed to improve her teeth. DRS originally declined, stating that it has a policy of refusing to provide payment for dental work. VOPA advocated for the woman to receive the dental work. Negotiations are ongoing.
3. VOPA represents an individual who has had her educational funding discontinued by DRS due to her resources being improperly considered. VOPA will use this case to both argue on the client's behalf and to argue for systemic changes to DRS' policy to ensure that DRS properly funds educational services.
4. VOPA represented a woman with traumatic brain injury who had her DRS case closed due to personality conflicts with the counselor. VOPA successfully advocated to have her file re-opened and she received services.
5. VOPA represented a student with quadriplegia who wished to take driver's education, in an adapted van, as a part of his transition plan. Initially, both his school and DRS refused to fund the course. After VOPA filed for due process, both the school and DRS agreed to fund the course and split the payments.
6. A 54 year old woman diagnosed with post traumatic stress disorder, a hearing impairment, as well as physical problems, contacted VOPA as she could not access needed services from the Department of Rehabilitative Services. With VOPA's strong advocacy, she was able to achieve the following: additional diagnostic services (hearing tests and agreement by DRS to assist where Medicare does not pay for needed hearing aids); a work station for her computer; and an ergonomically correct chair. DRS also agreed to pay for online training for her to eventually become a Master Herbalist.

She and her VR counselor have re-established a positive working relationship and she has been able to resolve strong conflicts that she felt toward the VR supervisor after a meeting with VOPA.

k. On-line information/outreach:

VOPA maintains a website that posts all of our federal grants' priorities, goals, and objectives, including CAP. This website also has the notices for the Board of Directors' and VOPA's Advisory Councils meetings. Job vacancies, announcements, VOPA publications, quarterly newsletters, and disability-related links are also available. The annual public comment process is posted on the website and visitors can participate on-line.

In FY 2004 there were 15,178 VOPA website hits. This is nearly double what we had in FY2003.

As noted above, VOPA posted its legislative updates on-line.

VOPA used the VOPA Web-site to recruit volunteers to serve on our two Advisory Councils. Meetings of the Advisory Councils and the Board of Directors are posted on the web-site. Meeting announcements are also posted on disability related list-serves. Minutes from the Board of Directors Meetings are also posted on the Web-site.

Annually, VOPA gathers input from the public as it develops its goals and objectives for the fiscal year. A web-based survey was posted on the VOPA website and was announced to the public via several listservs. VOPA received over 30 responses even though the survey was only posted for about two weeks.

Signature and title of CAP program director: The director of the CAP agency should sign the form to certify that it is complete and correct.

(Electronic submission)

Colleen Miller, Executive Director

12/20/04

Date

Disability Information Technology Initiative



**TRAIN
IT**

COMPLAINT AND APPEAL PROCESS

COMPLAINT *(informal)*

A complaint is when you contact our Office and let us know that you are not happy because of something we did or didn't do. There are many reasons why you may feel you need to file a complaint. Whatever your reason, you have the right to file a complaint. Anyone that applies for our services can file a complaint. This includes you, a family member, or your representative.

We ask that you share your feelings with the person on the Project TRAIN IT Mobile Rehabilitation Team who helped you with your problem or situation. If you would feel better filing your complaint with someone else, you may contact the Vocational Services Division Director at Woodrow Wilson Rehabilitation Center who is responsible for operations of the Project TRAIN IT Mobile Rehabilitation Team:

(540) 332-7230 or 1-800-345-9972, ext. 27230
Box W-81, P.O. Box 1500, Fishersville, VA 22939-1500

APPEAL *(formal)*

An appeal is when you contact our office, in writing, to let us know that you did not like our action or decision. You, a family member, or your representative may file an appeal if:

- You think that we should have given you some type of service that you did not receive
- You are not happy with the service that we did provide you.
- You think we did not meet our legal obligation to you.
- You think we discriminated against you in any way

Filing an appeal requires that you send us, in writing:

- Your name, address, telephone number, and the disability you have.
- The action or decision you disagree with and the approximate date of our decision.
- What you want us to do about it.

You have one hundred and eighty (180) calendar days after an action is taken or a decision is made to file your appeal. You have another thirty (30) calendar days to file a second appeal if you are unhappy after the first decision is made.

First appeals are to be sent to:

Project TRAIN IT Mobile Rehabilitation Team
c/o Woodrow Wilson Rehabilitation Center
Attn: Vocational Services Division Director
Box W-81, P.O. Box 1500
Fishersville, VA. 22939-1500
(540) 332-7230

Second appeals are to be sent to:

Project TRAIN IT Administration Office
c/o Shenandoah Valley Workforce Investment Board
Attention: Project Director
P.O. Box 869, Harrisonburg, VA 22802
(540) 574-4674 or (540) 442-7134

A second appeal decision of the Project TRAIN IT Administrative Office is final.

COMPLAINT AND APPEAL PROCESS

COMPLAINT

A complaint is when you contact our Office and let us know that you are not happy because of something we did or didn't do. There are many reasons why you may feel you need to file a complaint. Some examples of complaints would be if we returned your telephone call at a time that was not good for you or if you feel we have not shown you concern about your situation. Whatever your reason is, you have the right to file a complaint. Anyone that applies for our services can file a complaint. This includes you, a family member, or your representative.

We ask that you share your feelings with the person who helped you with your problem or situation. If you would feel better filing your complaint with someone else, you may contact the Policy Director at 1-800-552-3962. It doesn't matter who you contact. VOPA has two (2) business days to give you an answer about your complaint.

APPEAL

An appeal is when you contact our Office in writing, to let us know that you did not like our action or decision. You, a family member, or your representative may file an appeal if:

- ☐ You think that we should have given you some type of service.
- ☐ You are not happy with the service that we did provide you.
- ☐ You think we did not meet our legal obligation to you.
- ☐ You think we discriminated against you because of your disability, race, or something else.

If you want to appeal, you need to contact our Office. You have twenty-one (21) calendar days to file your appeal. Please send us the following information:

- ☐ Your name, address, telephone number, and the disability you have.
- ☐ The action or decision you disagree with and the approximate date of our decision.
- ☐ What you want us to do about it.
- ☐ Send any other information you think might help clear this up.

If you have questions about how to appeal the decision, anyone who works here can help you. Call us at 1-800-552-3962, e-mail us at generalvopa.state.va.us, or write to us at:

COMPLAINT/APPEAL
Virginia Office for Protection and Advocacy
1910 Byrd Avenue, Suite 5
Richmond, Virginia 23230

We will give you a copy of our Complaint and Appeal Policy if you ask for one.